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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	_	ithorized Com	_		(	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	·	kample: If typing, ver the lines.	type	12FE4M5	
BENTIVOLIO FOR CON			1 1 1 1 1 1	1 1 1	1 1 1 1 1	
I						
ADDRESS (number and street)	260 White Pine					
▼ Check if different						
than previously reported. (ACC)	MILFORD					18381
2. FEC IDENTIFICATION NU	MBER ▼	CITY A		S	STATE A	ZIP CODE ▲
C C00656033		3. IS THIS REPORT	x NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Choo (a) Quarterly Reports:	ose One)	(b) 12-Day <b>PRE</b>	E-Election Report	for the:		
April 15 Quarterly Re	eport (Q1)		Primary (12P)		General (12	PG) Runoff (12R)
July 15 Quarterly Re			Convention (12	2C)	Special (12	S)
October 15 Quarterly		Election on	M M /	D D /	Y Y Y Y	in the State of
January 31 Year-End	Report (YE)	(c) 30-Day <b>POS</b>	ST-Election Repo	rt for the:		
			General (30G)		Runoff (30F	R) Special (30S)
Termination Report (	ΓER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period 04	/ 01 /	<sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> 2020	through	M M 06	/ 0 0 /	2020
I certify that I have examined this	Report and to a		nowledge and be	elief it is tru	ue, correct and	complete.
Type or Print Name of Treasurer  Piwko  Signature of Treasurer	, Richard, A, ,		[Electronically Fi	led] Di	ate 07	/ D D / Y Y Y Y Y 2020
NOTE: Submission of false, erroneo	us, or incomplete	e information may	subject the perso	n signing th	nis Report to the	penalties of 52 U.S.C. §30109
Office Use Only						FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
BENTIVOLIO FOR CONGRESS

R	eport	t Covering the Period: From:	04 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M <sub>06</sub> M <sub>06</sub> / M <sub>30</sub> / Y Y 2020 Y
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	56842.64	97567.91
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	17786.26
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	56842.64	79781.65
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	18575.65	41979.11
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	18575.65	41979.11
3.		sh on Hand at Close of porting Period (from Line 27)	43274.70	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on a sedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on bedule C and/or Schedule D)	28799.55	

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

#### **BENTIVOLIO FOR CONGRESS**

04 01 2020 06 30 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 53994.37 81394.41 (i) Itemized (use Schedule A)..... 16173.50 2848.27 (ii) Unitemized ..... (iii) TOTAL of contributions 56842.64 97567.91 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) ..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 97567.91 56842.64 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 52500.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 52500.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 2150.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 56842.64 152217.91 (Carry Total to Line 24, page 4).....

**DETAILED SUMMARY PAGE** 

of Disbursements

FEC Form 3 (Revised 05/2016)

ırsements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	18575.65	41979.11
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
 19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed		
	by the Candidate	0.00	50120.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS		
	(add Lines 19(a) and (b))	0.00	50120.00
20	REFUNDS OF CONTRIBUTIONS TO:		
20.	(a) Individuals/Persons Other		
	Than Political Committees	0.00	17786.26
		0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	,		7
	(d) TOTAL CONTRIBUTION REFUNDS	0.00	17786.26
	(add Lines 20(a), (b), and (c))	7	7
	OTHER DISCHIPSEMENTS	0.00	75.00
<u></u>	OTHER DISBURSEMENTS	9	7
22.	TOTAL DISBURSEMENTS	18575.65	109960.37
	(add Lines 17, 18, 19(c), 20(d), and 21)	, , , , , ,	100000.01
	III. CASH S	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	5007.71
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	56842.64
25.	SUBTOTAL (add Line 23 and Line 24)		61850.35
26.	TOTAL DISBURSEMENTS THIS PERIOD (fr	om Line 22)	18575.65
27.	CASH ON HAND AT CLOSE OF REPORTIN	IG PERIOD	43274.70
	GUDITACE LINE 20 HOTH LINE 23)		

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Agema, Dave, , , Date of Receipt Mailing Address 3299 Tomahawk Dr SW 2020 14 City State Zip Code Transaction ID: SA11AI.5015 MI 49418 Grandville FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 200.00 Name of Employer Occupation Self Owner Memo Item Receipt For: 2020 Election Cycle-to-Date check Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) Arleen, Allen, , , Date of Receipt Mailing Address 2383 Loch Creek Way 2020 06 13 City State Zip Code Transaction ID: SA11AI.5012 Bloomfield Hills MI 48304 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Self Self Memo Item Receipt For: 2020 Election Cycle-to-Date check **x** Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Bauman, Emily, , , Date of Receipt Mailing Address 6129 N Harvey St 30 2020 City State Zip Code Transaction ID: SA11AI.5041 MI Westland 48185 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation Bentivolio for Congress Campaign Manager Memo Item Receipt For: 2020 Election Cycle-to-Date In-kind -Primary General 2000.00 Other (specify) 3200.00

SUBTOTAL of Receipts This Page (optional).....

### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Bauman, William, , , Date of Receipt Mailing Address 6129 N Harvey St 2020 19 City State Zip Code Transaction ID: SA11AI.5051 MI 48185 Westland FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2600.00 Name of Employer Occupation Christensen's Plant Center Sales Memo Item Receipt For: 2020 Election Cycle-to-Date In-kind **x** Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) Cash, Donation, , , Date of Receipt Mailing Address 510 Highland Ave 2020 #235 06 30 City State Zip Code Transaction ID: SA11AI.5037 Milford MI 48381 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 29500.00 Name of Employer Occupation Retired retired Memo Item Receipt For: 2020 Election Cycle-to-Date cash donation **x** Primary General 29856.40 Other (specify) ▼

Full Name (Last, First, Middle Initial) Grace, Arthur, , , Date of Receipt Mailing Address 11410 Lucerne 20 2020 City State Zip Code Transaction ID: SA11AI.4953 Redford Charter Township MI 48239 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Clearwater Const Services, Inc Owner Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot Primary General 500.00 Other (specify) -

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

32600.00

**EDSI** 

Receipt For: 2020

Primary

Other (specify)

General

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Grace, Arthur, , , Date of Receipt Mailing Address 11410 Lucerne 2020 20 City State Zip Code Transaction ID: SA11AI.5042 MI 48239 Redford Charter Township FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 600.00 Name of Employer Occupation Clearwater Const Services, Inc Owner Memo Item Receipt For: 2020 Election Cycle-to-Date In-kind **x** Primary General 1100.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Gryparis, Christos, , , Date of Receipt Mailing Address 21000 W 14 Mile Road 2020 06 23 City State Zip Code Transaction ID: SA11AI.4940 Bloomfield Hills MI 48301

FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	500.00
Callitechnic, LLC	Technologist	Memo Item
Receipt For: 2020  ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date   500.00	Anedot
Full Name (Last, First, Middle Initial) Haas, Debi, , ,		Date of Receipt
Mailing Address 5530 Rivers Edge Drive		06 14 2020
City	State Zip Code	Transaction ID : SA11AI.5027
Commerce	MI 48382	Transaction is 1 c/t i / tilose1
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	150.00

650.00

HR Manager / Owner

Election Cycle-to-Date

Memo Item

contribution

#### SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and or for commercial purposes, other than using t		person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRES		
Full Name (Last, First, Middle Initial)  Haas, Debi, , ,  Mailing Address 5530 Rivers Edge Drive		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Commerce	State Zip Code MI 48382	06 29 2020  Transaction ID : SA11Al.5028
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer  EDSI  Receipt For: 2020	Occupation HR Manager / Owner  Election Cycle-to-Date	Memo Item Contribution
Full Name (Last, First, Middle Initial)  Haas, Debi, , ,  Mailing Address 5530 Rivers Edge Drive	·	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Commerce	State Zip Code MI 48382	Transaction ID : SA11AI.5065
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer  EDSI  Receipt For: 2020	Occupation HR Manager / Owner  Election Cycle-to-Date	Memo Item In-kind -
Full Name (Last, First, Middle Initial)  Johns, Theresa, , ,  Mailing Address 9105 Steephollow Drive  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
White Lake Charter Township  FEC ID number of contributing federal political committee.	MI 48386	Amount of Each Receipt this Period
Name of Employer Self Receipt For: 2020	Occupation Owner  Election Cycle-to-Date  359.33	Memo Item In-kind -
SUBTOTAL of Receipts This Page (optional)		1468.41
TOTAL This Period (last page this line number	r only)	

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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			y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRES	SS		
Full Name (Last, First, Middle Initial) Johns, Theresa, , ,  Mailing Address 9105 Steephollow Drive			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State MI	Zip Code 48386	Transaction ID : SA11AI.4933
White Lake Charter Township  FEC ID number of contributing federal political committee.	С	40300	Amount of Each Receipt this Period
Name of Employer Self  Receipt For: 2020	Occupation Owner Election Cycl	le-to-Date ▼ 959.33	Memo Item Anedot
Full Name (Last, First, Middle Initial)  Kahle, Vickie, , ,  Mailing Address 3112 Hillside Dr  City	State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Milford	MI	48380	Transaction ID : SA11AI.4945
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer  Delta Supply Co.  Receipt For: 2020	Occupation Purchasing Election Cycl	300.00	Memo Item Anedot
Full Name (Last, First, Middle Initial)  Kassab, Sam, , ,  Mailing Address 3910 Coachwood Lane	Chaha	Tin Oada	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rochester Hills	State MI	Zip Code 48309	Transaction ID : SA11AI.4965
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer GAHC  Receipt For: 2020	Occupation Owner Election Cycl	le-to-Date	Memo Item Anedot
SUBTOTAL of Receipts This Page (optional).			950.00
TOTAL This Period (last page this line number	ar only)		·

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ITEMIZED RECEIPTS **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Kughn, Gary, A, , Date of Receipt Mailing Address 2948 Morrow Ln. 2020 17 City State Zip Code Transaction ID: SA11AI.4959 MI 48381 Milford8 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 200.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot **x** Primary General -1800.00Other (specify) Full Name (Last, First, Middle Initial) Lloyd, David, , , Date of Receipt Mailing Address 25204 BIRCHWOODS D 2020 05 12 City State Zip Code Transaction ID: SA11AI.4983 Novi MI 48374 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation **Chrysler Corporation** Engineer Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot x Primary General 450.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Mancini, Mike, , , Date of Receipt Mailing Address 18507 Merriman Road 25 2020 City State Zip Code Transaction ID: SA11AI.4976 MI Livonia 48152 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Redford Cement Co Concrete Contractor Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot Primary General 500.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Mancini, Mike, , , Date of Receipt Mailing Address 18507 Merriman Road 2020 25 City State Zip Code Transaction ID: SA11AI.4978 MI 48152 Livonia FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation Redford Cement Co Concrete Contractor Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot **x** Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Moreau, Michael, , , Date of Receipt Mailing Address 112758 De Cook Drive 2020 04 13 City State Zip Code Transaction ID: SA11AI.4999 Sterling Heights MI 48313 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot **✗** Primary General 300.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Ostin, Karen, L, , Date of Receipt Mailing Address 23411 Hillview Ct. 30 2020 City State Zip Code Transaction ID: SA11AI.5024 MI Farmington 48335 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2020 Election Cycle-to-Date contribution ✗ Primary General 230.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the ITEMIZED RECEIPTS 11d **Detailed Summary Page** 12 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Ostin, Karen, L, , Date of Receipt Mailing Address 23411 Hillview Ct. 2020 20 City State Zip Code Transaction ID: SA11AI.4948 MI 48335 Farmington FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 200.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot **x** Primary General 430.00 Other (specify) Full Name (Last, First, Middle Initial) Ostin, Karen, L,, Date of Receipt Mailing Address 23411 Hillview Ct. 2020 06 29 City State Zip Code Transaction ID: SA11AI.5025 Farmington MI 48335 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2020 Election Cycle-to-Date Contribution **✗** Primary General 1430.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Ostin, Karen, L, , Date of Receipt Mailing Address 23411 Hillview Ct. 29 2020 City State Zip Code Transaction ID: SA11AI.5067 MI Farmington 48335 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 90.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2020 Election Cycle-to-Date In-kind -✗ Primary General 1520.00 Other (specify) SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Patel, Raj,,, Date of Receipt Mailing Address 4418 Terra Ridge Dr 2020 30 City State Zip Code Transaction ID: SA11AI.4931 MI Milford 48381 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation Plante Moran Cyber Consultant Memo Item Receipt For: 2020 Election Cycle-to-Date Anedot **x** Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Piwko, Richard, A,, Date of Receipt Mailing Address 7284 Birchwood Rd. 2020 06 28 City State Zip Code Transaction ID: SA11AI.5040 Lexington MI 48450 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation Self-Employed Marketing Memo Item Receipt For: 2020 Election Cycle-to-Date In-kind x Primary General 2000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Poplawski, Terry, , , Date of Receipt Mailing Address Information Requested 29 2020 City State Zip Code Transaction ID: SA11AI.5022 48335 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2020 Election Cycle-to-Date contribution Primary General Other (specify) 1070.00 3500.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Poplawski, Terry, , , Date of Receipt Mailing Address Information Requested 2020 29 City State Zip Code Transaction ID: SA11AI.5068 48335 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 35.96 Name of Employer Occupation Memo Item Receipt For: 2020 Election Cycle-to-Date In-kind -Primary General 1105.96 Other (specify) Full Name (Last, First, Middle Initial) Rosati, Colette, , , Date of Receipt Mailing Address 3895 Dorothy Lane 2020 06 24 City State Zip Code Transaction ID: SA11AI.5031 48329 Waterford MI FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Self Self Memo Item Receipt For: 2020 Election Cycle-to-Date contribution **x** Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Rosati, Colette, , , Date of Receipt Mailing Address 3895 Dorothy Lane 24 2020 City State Zip Code Transaction ID: SA11AI.5033 MI Waterford 48329 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1700.00 Name of Employer Occupation Self Self Memo Item Receipt For: 2020 Election Cycle-to-Date contribution Primary General Other (specify) 2700.00 2735.96 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Roush, Jack, , , Date of Receipt Mailing Address 777 Thayer Boulevard 2020 29 City State Zip Code Transaction ID: SA11AI.5018 MI 48167 Northville FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2500.00 Name of Employer Occupation **Business Strategy** Roush Memo Item Receipt For: 2020 Election Cycle-to-Date contribution **x** Primary General 2500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Roush, Laura, , , Date of Receipt Mailing Address 777 Thayer Blvd 2020 06 29 City State Zip Code Transaction ID: SA11AI.5019 Northville MI 48167 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Self Artist Memo Item Receipt For: 2020 Election Cycle-to-Date contribution **✗** Primary General 2500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Tent, Randall, , , Date of Receipt Mailing Address 5805 Kingon Drive 20 2020 City State Zip Code Transaction ID: SA11AI.5016 MI **Brighton** 48116 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Diverse Health Services, PLLC Chiropractor Memo Item Receipt For: 2020 Election Cycle-to-Date contribution ✗ Primary General 500.00 Other (specify) -5500.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

53994.37

#### SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

	FOR LINE NUMBER: PAGE 16 OF	37									
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page	11a 11b 11c 11d _	_									
Detailed Suffillary Fage	12   13a   <b>X</b>   13b   14	15									

Any information copied from such or for commercial purposes, other							
NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CC							
Full Name (Last, First, Middle In Lee, Kristen, , ,			Date of Re	Date of Receipt			
Mailing Address 31193 Hillbrook	St.		M M /	30 2020			
City Livona	State MI	Zip Code 48152	Transaction	Transaction ID : SA13B.5039			
FEC ID number of contributing federal political committee.	C		Amount of	Each Receipt this Period			
Name of Employer Self Employed	Occupation Independent	Sales Consultant	x Memo	20460.00			
Receipt For: 2020    ✓ Primary General  Other (specify) ▼	Election Cyc	cle-to-Date ▼	loan to can				
В	Full Name (Last, First, Middle Initial)						
Mailing Address  City	State	Zip Code	M M /	D D / Y Y Y Y Y			
	State	Zip Code					
FEC ID number of contributing federal political committee.	C		Amount of	f Each Receipt this Period			
Name of Employer	Occupation			Mama Ham			
Receipt For:  Primary General  Other (specify) ▼		cle-to-Date ▼		Memo Item			
Full Name (Last, First, Middle In	itial)		Date of Re	accint			
C. Mailing Address			M M /	D D / Y Y Y Y Y			
City	State	Zip Code					
FEC ID number of contributing federal political committee.	С		Amount of	Each Receipt this Period			
Name of Employer	Occupation			, , , , , , , , , , , , , , , , , , ,			
Receipt For:  Primary General  Other (specify)	Election Cyc	Memo	o Item				
SUBTOTAL of Receipts This Page	e (optional)			0.00			
TOTAL This Period (last page this				0.00			

PAGE 17 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. All in One Campaign, LLC, , , 2020 01 Mailing Address 7284 Birchwood Rd. City State Zip Code **FEC Identification Number** MI Lexington 48450 Purpose of Disbursement Marketing C00656033 004 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Disbursement For: 2020 Office Sought: House 556.46 Senate Primary General Transaction ID: SB17.5057 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) All in One Campaign, LLC, , , Date of Disbursement Mailing Address 7284 Birchwood Rd. 2020 04 City State Zip Code **FEC Identification Number** MI 48450 Lexington Purpose of Disbursement Marketing C00656033 004 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Disbursement For: 2020 100.00 Office Sought: House Senate Primary General Transaction ID: SB17.5054 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. All in One Campaign, LLC, , , Date of Disbursement Mailing Address 7284 Birchwood Rd. 2020 City Zip Code State **FEC Identification Number** Lexington MI 48450 Purpose of Disbursement C00656033 004 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type 255.64 Office Sought: Disbursement For: 2020 House Senate Primary General Transaction ID: SB17.5061 President Other (specify) Memo Item State: MI District: 11 SUBTOTAL of Disbursements This Page (optional)..... 912.10 TOTAL This Period (last page this line number only).....

PAGE 18 37 FOR LINE NUMBER: (check only one) **X** 17 18 19a 20a 20b 20c 21

Use separate schedule(s) for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. All in One Campaign, LLC, , , 2020 23 Mailing Address 7284 Birchwood Rd. City State Zip Code **FEC Identification Number** MI Lexington 48450 Purpose of Disbursement Inv. 202000620 C00656033 004 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Disbursement For: 2020 4420.90 Office Sought: House Senate Primary General Transaction ID: SB17.5062 Other (specify) President Memo Item MI State: District: Full Name (Last, First, Middle Initial) Anedot Date of Disbursement Mailing Address 4017 Buena Vista St. #109 30 2020 City State Zip Code **FEC Identification Number** TX 75204 **Dallas** Purpose of Disbursement Fees 003 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 256.05 Office Sought: House Senate Primary General Transaction ID: SB17.5046 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. Bauman, Emily, , , Date of Disbursement Mailing Address 6129 N Harvey St 18 2020 City State Zip Code **FEC Identification Number** Westland MI 48185 Purpose of Disbursement C00656033 003 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Office Sought: 60.36 Disbursement For: 2020 House Senate Primary General Transaction ID: SB17.5059 President Other (specify) Memo Item State: MI District: 11 SUBTOTAL of Disbursements This Page (optional)..... 4737.31 TOTAL This Period (last page this line number only).....

PAGE 19 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20b 20c

ITEMIZED DISBURSEMENTS 19b 20a 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Bauman, Emily, , , 2020 Mailing Address 6129 N Harvey St 30 City State Zip Code **FEC Identification Number** MI Westland 48185 Purpose of Disbursement In-kind -Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 2000.00 Office Sought: House Senate Primary General Transaction ID: SB17.5044 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) Bauman, William, , , Date of Disbursement Mailing Address 6129 N Harvey St 2020 19 City State Zip Code **FEC Identification Number** MI 48185 Westland Purpose of Disbursement In-kind -Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 2600.00 Office Sought: House Senate Primary General Transaction ID: SB17.5053 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. BENTIVOLIO FOR CONGRESS Date of Disbursement Mailing Address 260 White Pine Trail 2020 City State Zip Code **FEC Identification Number MILFORD** MI 48381 Purpose of Disbursement C00656033 800 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Office Sought: 3700.00 Disbursement For: 2020 House General Senate Primary Transaction ID: SB17.5063 President Other (specify) Memo Item State: MI District: 11 SUBTOTAL of Disbursements This Page (optional)..... 8300.00 TOTAL This Period (last page this line number only).....

Office Sought:

House

### SCHEDULE B (FEC Form 3)

PAGE 20 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement CJ Graphics 2020 10 Mailing Address City State Zip Code FEC Identification Number MI Purpose of Disbursement Marketing C00656033 004 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Disbursement For: 2020 Office Sought: House 122.00 Senate Primary General Transaction ID: SB17.5055 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Grace, Arthur, , , Date of Disbursement Mailing Address 11410 Lucerne 20 2020 06 City State Zip Code **FEC Identification Number** MI 48239 Redford Charter Township Purpose of Disbursement In-kind -Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 600.00 Office Sought: House Senate Primary General Transaction ID: SB17.5043 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Haas, Debi, , , Mailing Address 5530 Rivers Edge Drive 29 2020 City State Zip Code **FEC Identification Number** Commerce MI 48382 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type

Senate Primary General Transaction ID: SB17.5072 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1001.68 TOTAL This Period (last page this line number only).....

Disbursement For: 2020

279.68

#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 21 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Johns, Theresa, , , 2020 06 29 Mailing Address 9105 Steephollow Drive City State Zip Code **FEC Identification Number** MI White Lake Charter Township 48386 Purpose of Disbursement In-kind -Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 Office Sought: House 188.73 Senate Primary General Transaction ID: SB17.5071 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Lee, Kristen, , , Date of Disbursement Mailing Address 31193 Hillbrook St. 18 2020 06 City State Zip Code **FEC Identification Number** MI 48152 Livona Purpose of Disbursement C00656033 Reimbursements 003 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type 295.00 Office Sought: Disbursement For: 2020 House -95 Senate Primary General Transaction ID: SB17.5060 President Other (specify) Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Lee, Kristen, , , Mailing Address 31193 Hillbrook St. 29 2020 City State Zip Code **FEC Identification Number** Livona MI 48152 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 14.87 Office Sought: House Senate Primary General Transaction ID: SB17.5048 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 498.60 TOTAL This Period (last page this line number only).....

PAGE 22 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20b 20c

ITEMIZED DISBURSEMENTS 19b 20a 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Ostin, Karen, L, , 2020 Mailing Address 23411 Hillview Ct. 29 City State Zip Code **FEC Identification Number** MI Farmington 48335 Purpose of Disbursement In-kind -Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 Office Sought: House 90.00 Senate Primary General Transaction ID: SB17.5070 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) Perks on Us Date of Disbursement Mailing Address 2020 04 City State Zip Code **FEC Identification Number** MI 48081 St Clair Shores Purpose of Disbursement Text Messaging C00656033 003 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Disbursement For: 2020 500.00 Office Sought: House Senate Primary General Transaction ID: SB17.5049 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. Piwko, Richard, A,, Date of Disbursement Mailing Address 7284 Birchwood Rd. 04 01 2020 City State Zip Code **FEC Identification Number** Lexington MI 48450 Purpose of Disbursement C00656033 001 Candidate Name Amount of Each Disbursement this Period Category/ BENTIVOLIO FOR CONGRESS Type Office Sought: 500.00 Disbursement For: 2020 House Senate Primary General Transaction ID: SB17.5056 President Other (specify) Memo Item State: MI District: 11 SUBTOTAL of Disbursements This Page (optional)..... 1090.00 TOTAL This Period (last page this line number only).....

PAGE 23 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Piwko, Richard, A, , 2020 06 28 Mailing Address 7284 Birchwood Rd. State City Zip Code **FEC Identification Number** MI Lexington 48450 Purpose of Disbursement In-kind -Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2020 2000.00 Office Sought: House Senate Primary General Transaction ID: SB17.5045 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

18539.69

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

LOAN SOURCE Full N BENTIVOLIO, KE	•	ddle Initial)	☐ Memo Ite	Election: 2020  Primary  General
Mailing Address 510 Highland Ave. #235				Other (specify)
City		State	ZIP Code	✗ Personal Funds of the Candidate
Milford		MI	48381	
Original Amount of Loa	an 3000.00	Cumulative Pa	nent To Date Ba	alance Outstanding at Close of This Period
	,		9	3000.00
TERMS Date Inc	urred		te Due Interest Ra (If none, en	ter 0)
M03 <sup>M</sup> / D05 <sup>D</sup> /	<sup>Y</sup> Ž02Ŏ <sup>Y</sup>	M M / D D	<sup>∕</sup> On Ďemand v	0.00 % (apr) Yes X No
List All Endorsers or C	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, Fire	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
2. Full Name (Last, Firs	t, Middle Initial)	·	Name of Employer	
Mailing Address			Occupation	
			Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
3. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	7 7
4. Full Name (Last, Firs	t, Middle Initial)	'	Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9
	l		_	
BTOTALS This Period	This Page (optional)			3000.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.4364 NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary BENTIVOLIO FOR CONGRESS General Mailing Address 260 White Pine Trail Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MILFORD MI 48381 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 10.00 <sup>D</sup>13<sup>D</sup> M 10M ž017 D02D Ŏ01Ŏ x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

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IAME OF COMMITTEE (In Full) BENTIVOLIO FOR CO				Т	Fransaction ID : SC/10.4144				
LOAN SOURCE Full Name	(Last, First, Mic	Idle Initial)		Mem	o Item Election: 2018				
BENTIVOLIO FOR C	•	,		IVIEITI	Primary				
DEIVITVOLIO I OIL O	ONONLOG				General				
Mailing Address 260 White Pine Trail					Other (specify) ▼				
200 Write Fine ITali									
City		State	ZIP Code	<del></del>					
MILFORD		MI	48381		Personal Funds of the Candidat				
WILL OND			10001						
Original Amount of Loan		Cumulative Pa	yment To D	ate	Balance Outstanding at Close of This Period				
	500.00			0.00	500.00				
, , , , ,	300.00			0.00	300.00				
TERMS Date Incurred			Date Due	Intere	est Rate Secured:				
					ne, enter 0)				
M01M / P16P / Y	Ž018 <sup>Y</sup>	M M / D D	' / Y 10	/15/18 <sup>Y</sup>	1.50 % (apr) Yes X No				
List All Endorsers or Guara	antors (if any) to	o Loan Source							
1. Full Name (Last, First, M	liddle Initial)		1	Name of Employer	r				
Mailing Address			(	Occupation					
				Amount					
	12	T		Amount Guaranteed					
City	State	ZIP Code		Outstanding:					
2. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer	7				
Mailing Address				Occupation					
Walling Address			`	Оссираноп					
			1	Amount					
City	State	ZIP Code		Guaranteed					
			(	Outstanding:	,				
3. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer	r				
Mailing Address				Occupation					
Walling Address				о оо арашот.					
				Amount					
City	State	ZIP Code		Guaranteed					
			(	Outstanding:	, , , , , , , , , , , , , , , , , , , ,				
4. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer	r				
Mailing Address			(	Occupation					
			<u> </u>	Amount					
City	State	ZIP Code		Guaranteed					
	State	2 3345	(	Outstanding:	7				
SUBTOTALS This Period This	Page (optional)			·····	500.00				
TOTAL C This Danie 1 // 1	in this the	Δ							
TOTALS This Period (last page	in this line only	')		•••••••••••••••••••••••••••••••••••••••	, , , , , , , , , , , , , , , , , , ,				
Carry outstanding balance only	y to LINE 3, Sch	edule D, for thi	is line. If no	Schedule D, car	rry forward to appropriate line of Summary.				

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

					130			
AME OF COMMITTEE (In Full) BENTIVOLIO FOR CON	IGRESS			Trans	action ID : SC/10.4496			
LOAN SOURCE Full Name (I	Last, First, Mic	ddle Initial)		Memo Iter	Election: 2018			
BENTIVOLIO FOR CO		,		□ Memo itel	Primary			
DEITH VOLIO 1 OK OC	JIVOINE OU				General			
Mailing Address 260 White Pine Trail					Other (specify) $\blacktriangledown$			
200 William Hall								
City		State	ZIP Cod	de				
MILFORD		MI	48381		Personal Funds of the Candidate			
Original Amount of Loan		Cumulative Pa	yment To	Date Ba	alance Outstanding at Close of This Period			
	275.00			0.00	275.00			
7	4	7			2 2			
TERMS Date Incurred		С	Date Due	Interest Ra (If none, en				
M <sub>04</sub> M / D <sub>25</sub> D / Y 2	2018 Y	M M / D D	) / Y 4		10.00			
04 25 2	2018		نا ل	1/10/10	% (apr) Yes No			
List All Endorsers or Guaran	ntors (if anv) to	o Loan Source						
1. Full Name (Last, First, Mic	, ,,			Name of Employer				
, , ,	,							
Mailing Address				Occupation				
				Amount				
O:4.	0+-+-	7ID 0I-		Guaranteed				
City	State	ZIP Code			7			
2. Full Name (Last, First, Mide	dle Initial)			Name of Employer				
Mailing Address				Occupation	_			
	1	T		Amount Guaranteed				
City	State	ZIP Code			7			
3. Full Name (Last, First, Mide	dle Initial)			Name of Employer				
Mailing Address				Occupation				
Walling Address				Goodpation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:				
4. Full Name (Last, First, Midd	alla laitial\			Name of Employer				
4. Full Name (Last, First, Milds	ale Iriiliai)			Name of Employer				
Mailing Address				Occupation				
0.1	lo	710.0		Amount Guaranteed				
City	State	ZIP Code		Outstanding:	7			
SUBTOTALS This Period This Pa	age (optional)			······	275.00			
FOTALS This Period (last page in	n this line only	v)						
	orny	,			y y			
Carry outstanding balance only	to LINE 3. Sch	edule D. for thi	s line. If	no Schedule D. carry fo	orward to appropriate line of Summary.			
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

						130			
	ME OF COMMITTEE (In Full) ENTIVOLIO FOR CONGR	ESS			Transa	action ID : SC/10.4456			
	LOAN SOURCE Full Name (Last, BENTIVOLIO FOR CONG Mailing Address 260 White Pine Trail		ddle Initial)		☐ Memo Iten	n Election: 2018			
	City		State	ZIP Co	de				
	MILFORD		MI	48381		Personal Funds of the Candidate			
	Original Amount of Loan		Cumulative Pay	yment To	Date Ba	lance Outstanding at Close of This Period			
	1575	i.00			0.00	1575.00			
	TERMS Date Incurred		D	ate Due	Interest Ra (If none, ent				
	M06M / D30D / Y Z018	Y	M M / D D	/ Y	<sup>Y</sup> 8/10/18 <sup>Y</sup> 0.00				
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed				
	Oity	State	Zii Oode		o atota. ramigi	7			
	2. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed				
	<u> </u>		211 0000		Outstariding.	7			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed				
			2 0000		Outstanding:	7 7			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
SI	JBTOTALS This Period This Page (	optional)				1575.00			
т	OTALS This Period (last page in this	line only	·) ·······						
C	arry outstanding balance only to LII	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	rward to appropriate line of Summary.			
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				Detailed Guillinary	1 agc		13b		
NAME OF COM BENTIVOL	MITTEE (In Full)			Tran	saction ID :	SC/10.4502			
	RCE Full Name (Last, First, DLIO FOR CONGRES	*		☐ Memo Ito	<b>x</b> Pri	n: 2018 imary eneral			
Mailing Addr 260 White Pir	ess ne Trail					her (specify) ▼			
City MILFORD		State MI	ZIP Code 48381	Dersonal Funds of the Candidat					
Original Am	nount of Loan 750.00	ayment To D	0.00	Balance Out	standing at Close of T	his Period			
TERMS	Date Incurred	I	Date Due	Interest F		Secured	l:		
<sup>M</sup> 07 <sup>M</sup> /	<sup>D</sup> 09 <sup>D</sup> / Y Z018 Y	M10 M / D13 <sup>E</sup>	) / Y (	ŏooğ <sup>Y</sup>	10.00	% (apr) Yes	x No		
List All End	orsers or Guarantors (if any	/) to Loan Source							
1. Full Nam	e (Last, First, Middle Initial)			Name of Employer					
Mailing A	Address			Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	,	7			
2. Full Name	e (Last, First, Middle Initial)	<b>'</b>		Name of Employer					
Mailing A	ddress			Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:	7	7			
3. Full Name	e (Last, First, Middle Initial)			Name of Employer					
Mailing A	ddress			Occupation					
City	State	ZIP Code		Amount Guaranteed			7		
		2 0000		Outstanding:	,	7			
4. Full Name	e (Last, First, Middle Initial)			Name of Employer					
Mailing A	ddress		Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:	,				
SUBTOTALS T	his Period This Page (option	al)		······································		750	0.00		
TOTALS This P	Period (last page in this line	only)		······		,			
Carry outstand	ling balance only to LINE 3,	Schedule D. for thi	is line. If n	Schedule D. carry 1	forward to a	appropriate line of Su	ımmarv.		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

**PAGE** 

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×	13a
	13b

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Transaction ID: SC/10.4523 NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary BENTIVOLIO FOR CONGRESS General Mailing Address 260 White Pine Trail Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MILFORD MI 48381 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1800.00 620.00 1180.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 1.50 D 15D <sup>M</sup>80<sup>M</sup> Ž018 <sup>Y</sup> 11/01/18 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1180.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE 31 OF FOR LINE NUMBER: (check only one)

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13a Detailed Summary Page X 13b Transaction ID: SC/10.5039 NAME OF COMMITTEE (In Full) BENTIVOLIO FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2020 **✗** Memo Item Primary Lee, Kristen, , , General Mailing Address 31193 Hillbrook St. Other (specify)  $\blacktriangledown$ City State ZIP Code Personal Funds of the Candidate MI 48152 Livona Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 20460.00 0.00 20460.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 3.00 D30 D M 06M **2020** Y11/05/2020 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 0.00 TOTALS This Period (last page in this line only)..... 7530.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 32 OF FOR LINE NUMBER: (check only one)

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=XC	duding Loans			Hambered line)	<b>  *</b>   10
	ME OF COMMITTEE (In Full)				
E	BENTIVOLIO FOR C	ONG	RESS		
	A. Full Name (Last, First, Middle Initial) of De	btor or Cre	ditor	Nature of Debt (Purp	ose):
	Bauman, Emily, , ,			JFC - Mailing Suppli	es (To be reimbursed)
ŀ	Mailing Address 6129 N Harvey St				
	Mailing / Marcos 6129 N Harvey St				
Ī	City	State	Zip Code		
	Westland	MI	48185		
	Outstanding Balance Beginning This Period			Transaction ID : SI	)10.4829
	67.58				
	Amount Incurred This Period		Payment This Period	Outstanding Baland	ce at Close of This Period
	0.00		0.0	00	67.58
	7 7		9		
Ì	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	litor	Nature of Debt (Purp	
	Bauman, Emily, , ,			JFC - Printing (To be	reimbursed)
ŀ	Mailing Address 6129 N Harvey St				
	6129 N Harvey St				
	City	State	Zip Code		
	Westland	MI	48185		
	Outstanding Balance Beginning This Period			Transaction ID : SI	)10.4831
	15.16				
	Amount Incurred This Period		Payment This Period	Outstanding Baland	ce at Close of This Period
	0.00		0.0	00	15.16
	7 7 7		7		
	C. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	editor	Nature of Debt (Purp	
	Bauman, Emily, , ,			JFC - Printing (To be	e reimbursed)
ŀ	Mailing Address 6129 N Harvey St				
	·	01-1-	7: 0.4		
	City Westland	State MI	Zip Code 48185		
ŀ			40100	Transaction ID - C	
	Outstanding Balance Beginning This Period			Transaction ID : S	D10.4832
	2.07				
	Amount Incurred This Period		Payment This Period	Outstanding Baland	ce at Close of This Period
	0.00	L	0.0	00	2.07
	, ,		, , ,		,
1)	SUBTOTALS This Period This Page (optional	)		•	84.81
2)	TOTALS This Period (last page this line num	ber only) ····		··· <b>-</b>	.,
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	page only)		
4)	ADD 2) and 3) and carry forward to appropri	iate line of	Summary Page (last page or	nlv) 🕨 📗	

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(Use separate schedule(s) for each

PAGE 33 OF FOR LINE NUMBER: (check only one)

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:XC	luding Loans			numbered line)	<b>  X</b>   10
NAI	ME OF COMMITTEE (In Full)				
В	SENTIVOLIO FOR CO	ONG	RESS		
	A. Full Name (Last, First, Middle Initial) of De		Nature of Debt (Purpose):		
	BENTIVOLIO, KERRY, , ,	JFC - Com reimbursed	munications Services (To be i)		
	Mailing Address 510 Highland Ave. #235				
Ī	City	State	Zip Code		
	Milford	MI	48381		
	Outstanding Balance Beginning This Period			Transactio	on ID : SD10.4651
	200.00				
	Amount Incurred This Period		Payment This Period	Outstandir	ng Balance at Close of This Period
	0.00		0.0		200.00
=	B. Full Name (Last, First, Middle Initial) of Deb BENTIVOLIO, KERRY, , ,	otor or Credi	itor		ebt (Purpose): ng Supplies (To be reimbursed)
ŀ	Mailing Address 510 Highland Ave. #235				
f	City	State	Zip Code		
	Milford	MI	48381		
	Outstanding Balance Beginning This Period			Transactio	on ID : SD10.4592
	760.88				
	Amount Incurred This Period		Payment This Period	Outstandir	ng Balance at Close of This Period
	0.00		0.0	00	760.88
-	C. Full Name (Last, First, Middle Initial) of De BENTIVOLIO, KERRY, , ,	ebtor or Cred	ditor		ebt (Purpose): urity Services (To be reimbursed)
	Mailing Address 510 Highland Ave. #235				
ŀ	City	State	Zip Code		
	Milford	МІ	48381		
Ī	Outstanding Balance Beginning This Period			Transacti	ion ID : SD10.4589
	3400.00				
	Amount Incurred This Period		Payment This Period	Outstandir	ng Balance at Close of This Period
	0.00		0.0	00	3400.00
1)	SUBTOTALS This Period This Page (optional)	)		>	4360.88
2)	TOTALS This Period (last page this line numb	ber only) ·····		···· <b>&gt;</b>	
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last pa	age only)	···· •	, ,
4)	ADD 2) and 3) and carry forward to appropri	ate line of S	Summary Page (last page o	nly) ▶	· · · · · · · · ·

**Excluding Loans** 

NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line)

PAGE 34 OF FOR LINE NUMBER: (check only one)

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	BENTIVOLIO FOR C	ONG	RESS		
	A. Full Name (Last, First, Middle Initial) of De BENTIVOLIO, KERRY, , ,	Nature of Debt (Purpose):  JFC - Legal Services (To be reimbursed)			
	Mailing Address 510 Highland Ave. #235				
	City	State	Zip Code	_	
ŀ	Milford	MI	48381		
	Outstanding Balance Beginning This Period			Transaction ID : SD10.4595	
	1250.00				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	1250.00	
Ī	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cre	ditor	Nature of Debt (Purpose):	
	BENTIVOLIO, KERRY, , ,			JFC - Communication Services (To be reimbursed)	
	Mailing Address 510 Highland Ave. #235				
-	City Milford	State MI	Zip Code 48381	_	
Ī	Outstanding Balance Beginning This Period	l		Transaction ID : SD10.4591	
	300.00				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	300.00	
•	C. Full Name (Last, First, Middle Initial) of De BENTIVOLIO, KERRY, , ,	btor or Cr	editor	Nature of Debt (Purpose): Campaign Committee - Bank Account Opening Balance (To be reimbursed)	
-	Mailing Address 510 Highland Ave. #235				
ŀ	City	State	Zip Code		
-	Milford	MI	48381		
	Outstanding Balance Beginning This Period			Transaction ID : SD10.4656	
	50.00				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	50.00	
1)	SUBTOTALS This Period This Page (optional	)	)	1600.00	
2)	TOTALS This Period (last page this line number only)				
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4)	ADD 2) and 3) and carry forward to appropri	ate line of	Summary Page (last page only)		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 35 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

RENTIVOLIO FOR CONGRESS

E	SENTIVOLIO FOR C	ONGH	RESS	
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BENTIVOLIO, KERRY, , ,			Nature of Debt (Purpose): JFC - Venue Expense (To be reimbursed)
Ī	Mailing Address 510 Highland Ave. #235			
ľ	City Milford	State MI	Zip Code 48381	
ĺ	Outstanding Balance Beginning This Period	,		Transaction ID : SD10.4588
	5000.00			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	5000.00
	B. Full Name (Last, First, Middle Initial) of Deb BENTIVOLIO, KERRY, , ,	otor or Credito	or	Nature of Debt (Purpose):  JFC - Meeting Food and Beverage (To be reimbursed)
	Mailing Address 510 Highland Ave. #235			
	City Milford	State MI	Zip Code 48381	
	Outstanding Balance Beginning This Period 75.23			Transaction ID : SD10.4830  Outstanding Balance at Close of This Period
	Amount Incurred This Period Payment This Period  0.00 0.00			75.23
	C. Full Name (Last, First, Middle Initial) of De BENTIVOLIO, KERRY, , ,	ebtor or Credi	tor	Nature of Debt (Purpose): JFC - Office Supplies (To be reimbursed)
	Mailing Address 510 Highland Ave. #235			
	City Milford	State MI	Zip Code 48381	
	Outstanding Balance Beginning This Period 31.64			Transaction ID : SD10.4826
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	31.64
1)	I) SUBTOTALS This Period This Page (optional)			5106.87
2)	TOTALS This Period (last page this line number only)			-
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)			· , , , , , , , , , , , , , , , , , , ,
4)	ADD 2) and 3) and carry forward to appropri	ate line of Su	ımmary Page (last page only)	<b>&gt;</b>

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 36 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

BENTIVOLIO FOR (	JUNG	KESS		
A. Full Name (Last, First, Middle Initial) of	Debtor or Cre	ditor	Nature of Debt (Purpose): Campaign - Office Supplies (To be	
Lee, Kristen, , ,	Lee, Kristen, , ,			
Mailing Address 31193 Hillbrook St.	Mailing Address 31193 Hillbrook St.			
City	State	Zip Code		
Livona	MI	48152		
Outstanding Balance Beginning This Peri	od		Transaction ID: SD10.4828	
27.03				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	27.03	
D. C. II Name // ant Circh Middle Initial) of I	Dalatan an Ona	II		
B. Full Name (Last, First, Middle Initial) of I Lee, Kristen, , ,	Deptor or Crec	iitoi	Nature of Debt (Purpose): Campaign - Printing (To be reimbursed)	
Mailing Address 31193 Hillbrook St.				
City	State	Zip Code		
Livona	MI	48152		
Outstanding Balance Beginning This Peri	Outstanding Balance Beginning This Period			
Amount Incurred This Period	_	Payment This Period	Outstanding Balance at Close of This Period	
0.00				
C. Full Name (Last, First, Middle Initial) of	Debtor or Cre	ditor	Notice of Dobt (Disease)	
Lee, Kristen, , ,			Nature of Debt (Purpose):  Campaign - Mailing Supplies (To be reimbursed)	
Mailing Address 31193 Hillbrook St.				
City	State	Zip Code		
Livona	MI	48152		
Outstanding Balance Beginning This Peri	od		Transaction ID : SD10.4834	
10.99				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	10.99	
SUBTOTALS This Period This Page (option)	nal)		103.52	
2) TOTALS This Period (last page this line no			100.32	
3) TOTAL OUTSTANDING LOANS from Sch				
4) ADD 2) and 3) and carry forward to appro	opriate line of	Summary Page (last page only)		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 37 OF
FOR LINE NUMBER:
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			, , , , , ,	
NAME OF COMMITTEE (In Full)  BENTIVOLIO FOR C	ONG	RESS		
A. Full Name (Last, First, Middle Initial) of DLee, Kristen, , ,	Nature of Debt (Purpose): Campaign - Office Supplies (To be reimbursed)			
Mailing Address 31193 Hillbrook St.				
City Livona	State	Zip Code 48152		
Outstanding Balance Beginning This Period		40132	Transaction ID : SD10.4835	
13.47	1			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	13.47	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Piwko, Richard, A, ,			Nature of Debt (Purpose): Treasurer fees	
Mailing Address 7284 Birchwood Rd.				
City Lexington	State MI	Zip Code 48450		
Outstanding Balance Beginning This Period	d		Transaction ID : SD10.4525	
5000.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	5000.00	
C. Full Name (Last, First, Middle Initial) of Diwko, Richard, A, ,	ebtor or Cre	ditor	Nature of Debt (Purpose): Treasurer fees	
Mailing Address 7284 Birchwood Rd.				
City	State	Zip Code		
Lexington	MI .	48450		
Outstanding Balance Beginning This Period	d		Transaction ID : SD10.4524	
5000.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	5000.00	
1) SUBTOTALS This Period This Page (optional	al)		10013.47	
2) TOTALS This Period (last page this line nur	mber only) ····		21269.55	
3) TOTAL OUTSTANDING LOANS from Scheo	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			
4) ADD 2) and 3) and carry forward to approp	oriate line of	Summary Page (last page only)	28799.55	